



AF/3732

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/667827	
	Filing Date	09/22/00	
	First Named Inventor	Paul S. FRIED et al.	
	Group Art Unit	3732	
	Examiner Name	C. O'Connor	
Total Number of Pages in This Submission		Attorney Docket Number	099488-2

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> SUPPLEMENTAL DECLARATION FOR REISSUE PATENT APPLICATION TO CORRECT "ERRORS" STATEMENT <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas W. Cole, Reg. No.: 28,290 Nixon Peabody LLP Suite 900 401 9th Street, N.W. Washington, D.C. 20004-2128
Signature	<i>Thomas W. Cole</i>
Date	March 1, 2003

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Attorney Docket No. 099488-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Paula S. Fried et al.)
Serial No. : 09/667,827) Examiner: C. O'Connor
Filed : September 22, 2000)
Title : DENTAL IMPLANTS AND) Art Unit: 3732
METHODS FOR EXTENDING)
SERVICE LIFE)

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RESPONSE

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Dear Sir:

In response to the Examiner's final Office Action mailed January 6, 2004, please find attached a Supplemental Declaration for Reissue Patent Application PTO/SB/02A signed by the inventors Paula Fried and Leonard Cooper which is believed to render moot the current rejection of claims 1-12 and 15, under 35 U.S.C. § 251 (and Rule § 1.175).

Having responded to the rejection set forth in the outstanding Office Action, it is submitted that claims 1-12 and 15 are now in condition for allowance. An early and favorable Notice of Allowance is respectfully solicited. In the event that the Examiner is of the opinion that a brief telephone or personal interview will facilitate

allowance of one or more of the above claims, the Examiner is courteously requested to contact Applicants' undersigned representative.

Respectfully submitted,

By: Thomas W. Cole
Thomas W. Cole
Registration No. 28,290

NIXON PEABODY LLP
401 9th Street, N.W., Suite 900
Washington, DC 20004-2128

Office: (202) 585-8000
Facsimile: (202) 585-8080

TWC/JWM